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**Art Unit: 2622**

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**From: Winston Hsu, Registration No. 41,526**

**Serial No.: 10/707,520**

**Attorney Docket No.: REAP0039USA4**

**Subject: Response to the Office Action mailed on 05/30/2006**

**Total Pages: 11 pages (including cover page)**

**Winston Hsu JUL 12 2006**

**REAP0039USA4\_A2\_1**

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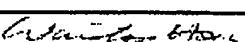
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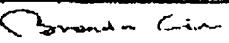
<b>TRANSMITTAL FORM</b>		Application Number <b>10/707,520</b>
		Filing Date <b>12/19/2003</b>
		First Named Inventor <b>Tung-Ming Su</b>
		Art Unit <b>2622</b>
		Examiner Name <b>Paulos M. Natnael</b>
(to be used for all correspondence after initial filing)	Total Number of Pages In This Submission <b>10</b>	Attorney Docket Number <b>REAP0039USA4</b>

<b>ENCLOSURES (Check all that apply)</b>		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):  <input type="checkbox"/> Remarks

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm Name	North America Intellectual Property Corporation		
Signature			
Printed name	Winston Hsu		
Date	7/12/2006	Reg. No.	41,526

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or printed name	Brenda Lin
Date	7/12/2006

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  
**FEE TRANSMITTAL  
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

## Complete if Known

Application Number	10/707,520
Filing Date	12/19/2003
First Named Inventor	Tung-Ming Su
Examiner Name	Paulos M. Natnael
Art Unit	2622
Attorney Docket No.	REAP0039USA4

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 50-3105 Deposit Account Name: North Amoris Intellectual Property Corporation

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2. EXCESS CLAIM FEES

Fee Description	Small Entity
Each claim over 20 (including Reissues)	50 25
Each independent claim over 3 (including Reissues)	200 100
Multiple dependent claims	360 180
Total Claims	Small Entity
Extra Claims	Fee (\$)
- 20 or HP =	x =
HP = highest number of total claims paid for, if greater than 20.	_____
Indep. Claims	Small Entity
Extra Claims	Fee (\$)
- 3 or HP =	x =
HP = highest number of independent claims paid for, if greater than 3.	_____
Multiple Dependent Claims	Fee (\$)
Fee (\$)	Fee Paid (\$)

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 4(f)(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50	(round up to a whole number)	x =	_____

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

Fee Paid (\$)

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature	Winston Hsu	41,526	3027291562
Name (Print/Type)	Winston Hsu	Date	7/12/2006

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**DUAL MODE TELEVISION TUNER CAPABLE OF PROCESSING BOTH  
DIGITAL AND SATELLITE TELEVISION SIGNALS AND METHOD  
THEREOF**

Appl. No.	:	10/707,520	Confirmation No. 1519
Applicant	:	Tung-Ming Su	
Filed	:	December 19, 2003	
TC/A.U.	:	2622	
Examiner	:	Paulos M. Natnael	
Docket No.	:	REAP0039USA	
Customer No.	:	27765	

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

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**AMENDMENT**

In response to the Office action of May 30, 2006, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

10 Remarks begin on page 7 of this paper.